

## The Commonwealth of Massachusetts Executive Office of Public Safety State Boxing Commission

## ADMINISTRATION USE ONLY! DO NOT WRITE IN THIS AREA!

This License	was	granted:
Date:		
Expires:		
License No:		

## APPLICATION FOR LICENSE AS A PROMOTER

IN ACCORDANCE WITH		Chapter 147, Ge	NERAL LAWS, A	ND RULES AND R	EGULATIONS OF THE
Date	MASSACHUSETTS STATE BOXING COMMISSION, 19				
I hereby make applicat	ion for a license to P	Promote boxing o	r sparring matc	hes or exhibition	s.
	(Please I	Print With Ball Po			
Name	Assumed or "Ring" Name				
Address		Telephone l	No. ( )		
City	State	Zip		Country	
DATE OF BIRTH: Mon	Day Yr.	PLACE BOI	RN: City	State	_ Country
HEIGHT:ft.	in. WEIGH	T:lbs.	COLOR EYES: _	НА	IR:
COMPLEXION:		_ DISTINGUISHIN	NG MARKS:		
OCCUPATION:		EMPLOYER			
EMPLOYER ADDRESS:			_TELEPHONE N	0. ( )	
CITY	STA	ATE	ZIP	COUNTI	RY
Have you ever held a Licen	se to be a Promoter in M	assachusetts?	YES	NO	
Have you ever been licensed to be a Promoter in other states?  Which?			NO		
Have you ever been convict Date O	ted of a felony or misden ffense	neanor in the past fiv Court	ve (5) years? YI	ES NO If YES, 1 Disposition	please provide details:
				0	
	A TRUE STATEMEN			OF PERJURY	
* Signature of Applica	nt				

Pursuant to M.G.L. Chapter 62C, Section 49A, I certify under the penalties that I, to my best knowledge and behalf, have filed all state returns and paid all state taxes required under law.						
**	Social Security	*	Signature of Individual or Corporate Name			
		Ву:				
Federal Identification Number		<u> </u>	Corporate Officer (If Applicable)			
*	This license will not be issued unless this certi	fication clause is signed by th	ne applicant.			
**	Your social security number will be furnished to the Massachusetts Department of Revenue to determine whether you have					

met tax filing or tax payment obligations. Licenses who fail to correct their non-filing or delinquency will be subject to

license suspension or revocation. This request is made under the authority of M.G.L. c. 620 section 49A.

Form BX 27A (rev. 8/97)